Docket No. INSL.0104

CONCLUSION

If the Examiner has any concerns or questions regarding this request, please contact the below-listed attorney for Applicant at (512) 295-8050.

Please charge any fees that may be due or credit any overpayments to the Deposit Account of Gary R. Stanford, Account No. 50-1469.

Respectfully submitted,

Date: July 11, 2005

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TRANSMITTAL		Filing Date	Mar 30, 2004			
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		Examiner Name	Jeffery Shawn Zwelzig		9	
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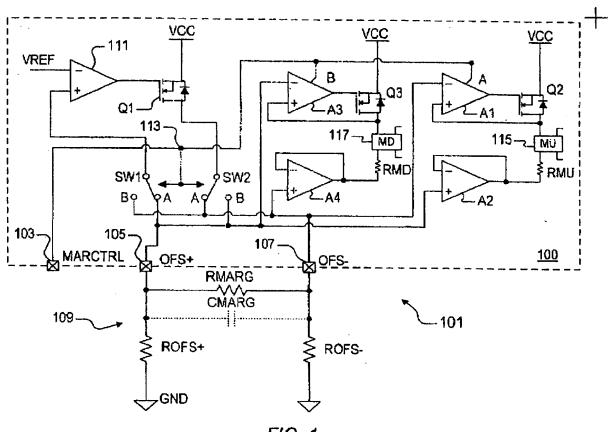


FIG. 1

